



Department of Medical Assistance Services
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Proposed Changes to Mental Health Support Services FACT SHEET

| What is this service? | Mental Health Skill-Building Services (MHSS) is the new name for Mental Health Support Services. The name change reflects that MHSS is a training service -- not a mental health treatment service, a preventative service, or a crisis service. MHSS is a training service for individuals with significant mental illness. The service is designed to train individuals in activities of daily living, use of community resources, improve behaviors related to health, safety, nutrition, physical condition, and medication adherence so that they may achieve and maintain community stability and independence. | | | | | | | | | | | | | |
|--|---|------|------------------|------|---------------|------|---------------|------|---------------|------|----------------|------|----------------|--|
| What are the costs of MHSS? | <div><div><div>MHSS Expenditures</div><table><thead><tr><th>Year</th><th>Expenditure (\$)</th></tr></thead><tbody><tr><td>2008</td><td>45,000,000.00</td></tr><tr><td>2009</td><td>65,000,000.00</td></tr><tr><td>2010</td><td>90,000,000.00</td></tr><tr><td>2011</td><td>135,000,000.00</td></tr><tr><td>2012</td><td>185,000,000.00</td></tr></tbody></table></div></div> | Year | Expenditure (\$) | 2008 | 45,000,000.00 | 2009 | 65,000,000.00 | 2010 | 90,000,000.00 | 2011 | 135,000,000.00 | 2012 | 185,000,000.00 | Since fiscal year 2008, there has been a \$138 million increase in the cost of this service. |
| Year | Expenditure (\$) | | | | | | | | | | | | | |
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| 2012 | 185,000,000.00 | | | | | | | | | | | | | |
| Why are changes needed? | Vague eligibility criteria have allowed individuals who do not have a diagnosis of significant serious mental illness to receive MHSS. MHSS is being utilized as companion care, rather than skill building/training for individuals with significant serious mental illness. | | | | | | | | | | | | | |
| What are the proposed changes to the units and rate? | The unit of service is one hour. Providers may accumulate in quarter hour increments, time worked less than one hour over the course of one week to make a unit. \$52 per hour = urban rate \$47.43 per hour = rural rate | | | | | | | | | | | | | |
| Limits | <ul style="list-style-type: none">• Basic Service Limits: 5 units daily; 25 units weekly; and 1300 units annually• Individuals in Assisted Living Facilities or Group Home (Level A & B): 5 units daily, 20 units weekly with half of the weekly units provided in the community; and 1040 units annually. ALFs and group homes may not serve as an MHSS provider for residents of their facilities.• Individuals in Nursing Facilities: 60 days prior to discharge.• Individuals in Residential Treatment Centers: Only the assessment for MHSS may be billed within 7 days of discharge from the facility. | | | | | | | | | | | | | |

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| What are the proposed changes to eligibility for MHSS? | <p>Under the new eligibility criteria for the service, an individual must meet all of the following:</p> <ul style="list-style-type: none"> • have a need for individualized training in acquiring basic living skills such as symptom management; adherence to psychiatric and medication treatment plans; development and appropriate use of social skills and personal support system; personal hygiene; food preparation; or money management; • have a qualifying mental health diagnosis (psychotic disorder, major depressive disorder – recurrent, or bipolar disorder I or II). If an individual has another disorder (such as, but not limited to PTSD and anxiety disorders) it will qualify if a physician determines it is a serious mental illness that results in severe and recurrent disability that produces functional limitations in major life activities, and the individual requires individualized training in order to achieve or maintain independent living in the community; • have a prior history of qualifying mental health treatment (psychiatric hospitalization, residential treatment, residential crisis stabilization, PACT or ICT services, RTC-Level C placement, or TDO evaluation due to mental health decompensation). This criterion will be evaluated for service authorizations but not for service reauthorizations; • have had a prescription for an anti-psychotic, mood stabilizing, or anti-depressant medication within the twelve months prior to the assessment date unless a physician documents that such medication is medically contraindicated. This criterion will be evaluated for service authorizations but not for service reauthorizations; and • If an individual is under the age of 21, they must be in an independent living situation or transferring into one within six months. |
| Service Authorizations | <p>Services provided under any authorization which is already in effect on the effective date of the revised regulations shall adhere to the new daily, weekly and annual limits as well as the new unit billing system. No other changes required under the revised regulations will apply until the renewal of the service authorization occurs. All requirements identified in 12VAC 30-50-226 and 12 VAC 30-60-143 shall apply to all authorizations requested on or after the effective date of this regulation.</p> |
| What are the proposed changes relating to overlaps with other services? | <p>The changes will prohibit duplication of services by prohibiting overlaps of MHSS with:</p> <ul style="list-style-type: none"> • ID or DD Waiver- in-home residential services or congregate residential services through the waiver; • DSS or CSA- independent living skills services; • Treatment foster care; and • Inpatient services: hospitals and intermediate care facilities for the mentally retarded. <p>The changes will limit the amount of MHSS that may be provided in assisted living facilities, group homes, nursing homes, and residential treatment centers.</p> |
| Staff Qualifications | <ul style="list-style-type: none"> • MHSS may be provided by mental health paraprofessionals. An individual may qualify as a paraprofessional through several avenues, including 90 hours of classroom experience and 12 weeks of experience under the supervision of qualified staff. • The assessment shall be performed by an LMHP. • The ISP shall be written by a QMHP-A, QMHP-C, or LMHP within 30 days of admission. |
| Effective date | <p>These changes will take place as soon as the emergency regulation process is complete. It is expected that the regulations will be implemented in Summer, 2013.</p> |
| Who to contact? | <p>Please contact the Behavioral Health Unit at DMAS with any questions you may have.</p> <p>Phone: 804-786-1002 Email: CMHRS@dmass.virginia.gov</p> |